## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

MS1 -866 US

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER SMALL I	
TOTAL CLAIMS			40					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			## minus 20=		• 20			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		. 3			X40=	•	OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		1	+270=	
* If	the difference	less than ze	ss than zero, enter "0" in c				TOTAL		OR OR	TOTAL		
CLAIMS AS AMENDED - PART II								IOIAL		IOH	OTHER	THAN
(Column 1)				(Colu	mn 2) (Column 3)		1 -	SMALL ENTITY		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	F.O. 411.2	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	+135=		OR	+270=	
							L	TOTAL			TOTAL ADDIT. FEE	
		(Column 1)		(Colu	<u>mn</u> 2)	(Column 3)		ADDIT. FEE	<u> </u>	4	AUUII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	HEST IBER OUSLY	PRESENT EXTRA	][	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDI	Total	* .	Minus	**		=	] ]	X\$ 9=		OR	X\$18=	
AME	Independent	NITATION OF MI	Minus	***	F.CL AIR4	=		X40=		OR	X80=	
l <u>.</u>	LINOI PHESE	NTATION OF MU	VEHPLE DEF	CINDEN	CLAIM		J	+135=		OR	+270=	
							4	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	Marie and the second se	(Column 1)	<u> </u>	(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	] [	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F (C)   410.0	<u> -</u>	<b>∤</b> ┞	X40=		OR	X80=	
	LLING! PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	I CLAIM		<b>┛</b> ┞	+135=	· · · · · · · · · · · · · · · · · · ·		+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL		OR OR	TOTAL	<u> </u>
***	If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Pai	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."		ADDIT. FEE	ropriate box	J	ADDIT. FEE	<b>L</b>